ITLE INSURANCE

			AFFID	AVIT				.64.1			
STA	TE OF INDIANA)			3.7 187 188							
COU	NTY OF LAKE)	:						. " 			
										<u>y</u> 2	_
ewn	Steven M. Wlazlo)		A.	······································	· ·	, be	ing fir	st वार्धु	30 16	
	rn upon oath, dep								SE	င်း	
1.	That	F. Wlaz	.lo,	1990	at_	DALL	uester	died o	NO.]]to	
2. wer	That <u>steven</u> re duly and legall e to the following	M. Wlazi y married g describ	d at th	and e time l estat	they a	leen F cquire	Wlazi d title	o e as hu	sband a		
The	North 32 1/2 feet 7 in Industrial thereof, record of Lake County,	Center S	Subdivi at Book	sion, i	n the	Town o	f Griff	ith, as	per p	lat	
·-7		s Docu the Lak			_		of				
acq	That the marital uired title to sa e of (MTS) (her)	id real									
4. hav	That all funeral re been paid in fu		s in co	nnectio	n with	the d	eath o	f said	deceden		
Fed	That all of the leral Estate Tax p decedent's life w	urposes,	includ	ing joi	nt bar	ik acco	unts a	nd life	insura	nce state	:
Fur	ther affiant saye	th not.	THE THE STATE OF T	EAL							
						8		M. W	las		
Sub	scribed and sworn December		re me, 19 ₉₄		y Publ	ic, th	M. W1	2nd	Uday	roi	
924 12			A					٠.٠ ل			N. S.
					Ľ	Inda J	McBri	de Nôta	ry Publ	ic	
Му	Commission expire	s:									
**********	1-26-95						M				
Cou	nty of Residence:			, , ,			مسلال				
	Lake			7 27	,	·i	44V				
Thi	s Instrument prep	ared by	Steve	en M. W	lazlo	<i>^</i> ^	. On	tons			
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